SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAXTIEED GOUNTLY, WISCONSIN  $\bigcirc$ 032016

APPLICATION FOR PERMIT

Permit #: Date: Amount Paid:

21.8 16-16

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

Bayfield Co. Zoning Dept.

Refund:

Section 29 , Township 47 N, Range 6	$\frac{NE}{S.} \frac{1/4}{6} \frac{NE}{1/4} \frac{1/4}{2} \qquad   Gov'' Lot   Lot(s)$	PROJECT Legal Description: (Use Tax Statement)	Authorized Agent: (Person Signing Application on behalf of Owner(s))	20		Jen Compton	TYPE OF PERMIT REQUESTED → □ LAND USE □ SAN
w Town of 150 ys tone	CSM Vol & Page Lot(s) No. Block(s) No.	PIN: (23 digits) 04- 36 957	Agent Phone: Agent Mailing Address (include City/State/Zip):	Contractor Phone: Plumber:	City/State/Zip: Wason Wi. 54854	Mailing Address: City/State/Zip: Telephone/852	SANITARY PRIVY CONDITIONALUSE SPECIALUSE
Lot Size Acreage	Subdivision:	Recorded Document: (i.e. Property Ownership) Volume //62 Page(s) //6	State/Zip): Written Authorization  Attached  Yes  No	Plumber Phone:	S Cell Phone:	1/5 - 105 1/4 1/5 - 105 39	HALUSE □ B.O.A. □ OTHER

			1	- 000 K	`		Value at Time of Completion * include donated time & material	X Non-Shoreland	□ Shoreland —	
クルナメメオ A	Property	☐ Run a Business on	☐ Relocate (existing bldg)	□ Conversion	☐ Addition/Alteration	□ New Construction	Project		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent)  Creek or Landward side of Floodplain?  If yes—continue—▶
	🏖 Foundation	☐ No Basement	☐ Basement	☐ 2-Story	□ 1-Stary + Loft	又 1-Story	# of Stories and/or basement		ו 1000 feet of Lake, Pon ול אַכּ	n 300 feet of River, Strea of Floodplain? If ye
				***	🗶 Year Round	Seasonal	Use		Pond or Flowage If yescontinue	Stream (incl. Intermittent) If yescontinue>
		X None		3	□ 2	<b>P</b>	# of bedrooms		Distance Stru	Distance Stru
None None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?		Distance Structure is from Shoreline :feet	Distance Structure is from Shoreline : feet
		ntract)	ulted (min 200 gallon	:ify Type:	ify Type:	1	pe of ry System operty?		□Yes	ls Property in Floodplain Zone?
			Work.		_ well	□ City	Water		□ Yes Æ'No	Are Wetlands Present?

Existing Structure: (if pe	rmit bei	Ç	Height	10
Proposea Construction:		rengur.	3,50	
Proposed Use	•	Proposed Structure	Dimensions	Square Footage
		Principal Structure (first structure on property)	×	The state of the s
		Residence (i.e. cabin, hunting shack, etc.)	( x )	
•		with Loft	×	- Anna Anna Anna Anna Anna Anna Anna Ann
N Residential Use		with a Porch	( ×	
		with (2 <sup>nd</sup> ) Porch	×	
		with a Deck	( x	
		with (2 <sup>nd</sup> ) Deck	( x	
Commercial Use		with Attached Garage	×	
		<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	×	
		Mobile Home (manufactured date)	×	
]		Addition/Alteration (specify)	×	
Municipal Use	×	Accessory Building (specify) Storage govage	( 5 × K)	ر 20 10
-		Accessory Building Addition/Alteration (specify)	( x	
			- La pappy	
		Special Use: (explain)	( x	The second secon
		Conditional Use: (explain)	×	and a second sec
		Other: (explain)	( ×	

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. 3-16

Authorized Agent:

Owner(s):

(If there are Multiple

Owners listed on the

MI Owners must sign or letter(s) of authorization must

accompany this application)

Date

Address to send permit

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date

Attach
Copy of Tax Statement
sed the property send your Recorded Deed

If you recently purcha

The box below:

Draw or Sketch your Property (regardless of what you are applying for)